Docke	PATEN*
	COMBINED DECLARATION AND POWER OF ATTORNEY
	(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)
As a b	elow named inventor, I hereby declare that:
	TYPE OF DECLARATION
This đ	eclaration is of the following type: (check one applicable item below)
	original design supplemental
Note:	If the Declaration is for an International Application being filed as a divisional, continuation of continuation-in-part application, do not check next item; check appropriate one of last three items.
	national stage of PCT
Note:	If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP.
	divisional continuation continuation-in-part (CIP)
	INVENTORSHIP IDENTIFICATION
WARNI	NG: If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.
that I a and joi	sidence, post office address and citizenship are as stated below, next to my name. I believe in the original, first and sole inventor (if only one name is listed below) or an original, first int inventor (if plural names are listed below) of the subject matter that is claimed, and for a patent is sought on the invention entitled:
	TITLE OF INVENTION
METI	HOD FOR FORMING ISOLATION LAYER OF SEMICONDUCTOR DEVICE
	SPECIFICATION IDENTIFICATION
he spe	cification of which: (complete (a), (b) or (c))
	(a) is attached hereto.
_	(b) was filed on as Serial No orExpress
L] (v) and titch day

Note: Amendments filed after the original papers are deposited with the PTO that contain new matter are not accorded a filing date by being referred to in the Declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental Declaration, are those amendments claiming 1 er not encompassed in the original statemen invention or claims. See 37 CFR 1.67.

(c) was described a	and claimed in PCT International Application No and as amended under PCT Article 19 on	
(if any).	•	

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56,

37, C	OGE OI	reueral regulations, 3 1.30,
		(also check the following items, if desired)
		and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and
_		in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 CFR 1.98.
		PRIORITY CLAIM (35 U.S.C. § 119(2)-(d))
foreig application belove or an State:	on apposition (v and heart of Alesson Alesso Alesso Alesso Alesso Alesso Ale	plication(s) for patent or inventor's certificate or of any PCT international designating at least one country other than the United States of America listed have also identified below any foreign application(s) for patent or inventor's certificate international application(s) designating at least one country other than the United merica filed by me on the same subject matter having a filing date before that of the (s) of which priority is claimed.
		(complete (d) or (e))
:	(d)	no such applications have been filed.
	☐ (e)	such applications have been filed as follows.
Note:		e item (c) is entered above and the international application which designated the U.S. itself claimed ity check item (e), enter the details below and make the priority claim.

PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)-(d)

COUNTRY (OR INDICATE IF PCT	APPLICATION NUMBER	DATE OF FILING (day/month/year)	CLAIME	ORITY ED UNDER EC 119
Republic of Korea	2001–15415	24/03/2001	× YES	NO [
			YES	NO [
			YES	NO 🗌
			YES	NO 🗌
			YES	№ 🗌

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) (34 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

FILING DATE

<i>,</i>	ALL FOREIGN APPLICATION(S), IF (6 MONTHS FOR DESIGN) PR	ANY, FILED MORE THAN 12 MONTHS RIOR TO THIS U.S. APPLICATION
Note:	the basis for this application entering the Ur	rom the filing date of this application is a PCT filing forming nited States as (1) the national stage or (2) a continuation, complete ADDED PAGES TO COMBINED DECLARATION DNAL, CONTINUATION OR CIP APPLICATION for benefit
	"	OF ATTORNEY
I here	eby appoint the following practitioner(ess in the Patent and Trademark Office o	(s) to prosecute this application and transact all onnected therewith (list name and registration number).
Timol Ring,	thy J. Keefer, 35,567; Douglas S. Rup 29,971; Gary R. Gillen, 35,157; Robert	ert, 44,434; Carmen B. Patti, 26,784; Thomas J. J. Brill, 36,760;Gregory B. Gulliver, 44,138
	Attached, as part of this declaration above-named practitioner(s) to accept a	and power of attorney, is the authorization of the and follow instructions from my representative(s).
	O CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO: (Name and telephone number)
V 2:	imothy J. Keefer Vildaman, Harrold, Allen & Dixon 25 West Wacker Drive Chicago, Illinois 60606	
_	- ·	(312) 201-2327

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Note: Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

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Full name of third joint inve (Given Name) Inventor's signature Date Residence Post Office Address Full name of fourth joint inv (Given Name) Inventor's signature Date	entor, if any (Middle Initial or Name) Country of Citizenship entor, if any (Middle Initial or Name)	(Family (or Last) Name) (Family (or Last) Name)